.2100 IN I	EKNAL TRANSFE	R REQUEST FOR S.N	1. 09/77,928
DATE:	9/19/01	FROM: BINH	TIEN 2643
FORWARD A. Art Unit: B. Class: C Subclass:	<u>2661</u> 370	REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):	(check box) (check box)
	XPLANATION IF NEE		
Ą	Im Eanipmen	TC	
DATE:		FROM:	
ORWARD Co. Art Unit: 3. Class: 5. Subclass:	TO:	REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):	(check box) (check box)
ATE:	·	FROM:	
ORWARD T	O CLASSIFIER	REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):	(check box) (check box)
JRTHER EX	(PLANATION IF NEED		
	ON BY 2700 CLAS	SIFICATION	
ATE:	<u> </u>	CLASSIFIER:	
ORWARD TO Art Unit: Class:	D:	REASON(S): A. You had Parent B. See Title C. See Abstract	Theck box)
		IC. See Abstract	creck box)

FURTHER EXPLANATION IF NEEDED: